

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>64930</i>	<i>3-7</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	184
2	0203
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Pos
Form
(Rev.)

If more than 150 claims or 10 actions
staple additional sheet here

"SEE INSIDE"